

State of Louisiana
OFFICE OF FINANCIAL INSTITUTIONS
COMPLAINT FORM

Please complete this form and return to: Louisiana Office of Financial Institutions
P.O. Box 94095
Baton Rouge, LA 70804-9095
Phone: (225) 925-4660 Fax: (225) 925-4524

Print in ink or type information.

➤	Your name:
➤	Your telephone number(s):
➤	Your mailing address:

➤	Type of entity about which you are complaining
<input type="checkbox"/>	Bank -- Please note: State-chartered banks only. Complaints regarding nationally-chartered banks should be directed to the Office of the Comptroller of the Currency at 1-800-613-6743 or by mail at Customer Assistance Group, 1301 McKinney Street, Suite 3710, Houston, TX 77010
<input type="checkbox"/>	Bond for Deed Escrow Agency
<input type="checkbox"/>	Check Casher
<input type="checkbox"/>	Collection Agency -- Please note: Report all consumer complaints to the Consumer Protection Division of the Attorney General's Office at (225) 342-7900 or the Federal Trade Commission at 1-877-FTC-HELP
<input type="checkbox"/>	Credit Repair Services Organization
<input type="checkbox"/>	Credit Union
<input type="checkbox"/>	Licensed Lender/Insurance Premium Finance Company (Finance Company) -- Please note: For motor vehicle sales financing, contact the Louisiana Motor Vehicle Commission, Sales Finance Division, at (504) 838-5207.
<input type="checkbox"/>	Loan Broker (Brokers consumer loans <u>not secured by real estate</u>)
<input type="checkbox"/>	Notification Filer/Retail Sales Contracts
<input type="checkbox"/>	Pawnbroker
<input type="checkbox"/>	Payday Lender
<input type="checkbox"/>	Repossession Agent
<input type="checkbox"/>	Residential Mortgage Lender/Mortgage Broker/Originator
<input type="checkbox"/>	Savings and Loan Association
<input type="checkbox"/>	Seller of Checks (Money Orders)/Money Transmitters
<input type="checkbox"/>	Other _____
➤	Name of entity about which you are complaining:
➤	Address of entity about which you are complaining:
➤	Name and telephone number of person with whom you dealt:
➤	Description of your complaint: (Include dates in your descriptions, and attach copies of all documentation which can support your complaint such as: correspondence, loan promissory notes or any other contracts; canceled checks, etc. DO NOT send originals, keep them for your records. Attach additional pages, if needed).

Description of your complaint: (continued)
➤ What would satisfy your complaint?
➤ What dollar amount is involved in this complaint, if applicable?

<p>I authorize the Office of Financial Institutions to send a copy of this complaint, together with supporting documents, to the company against which the complaint is filed and other private or public agencies.</p> <p>I understand that the Office of Financial Institutions is not my legal representative. I understand that it is recommended that I consult a private attorney and that I may lose my private right to sue about this matter entirely if I wait too long to do so. I understand that any action by the Office of Financial Institutions may not result in a refund or other relief for me personally.</p> <p>I wish to file this complaint with the Office of Financial Institutions. I understand that your office does not conduct litigation for individuals in matters, which involve purely private controversies. I am, however, filing this complaint to notify your office of the activities of this party and to seek any other assistance you may be able to render.</p> <p>Your signature and the date are required for this office to process your complaint.</p> <p>Signature: _____ Date: _____</p>
